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PATENT  
Attorney Docket No. ADI-099

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Jones et al. CONF NO.: 3619  
SERIAL NO.: 10/720,845 GROUP NO.: 3728  
FILING DATE: November 24 2003 EXAMINER: Stashick, Anthony D.  
TITLE: Shoe Closure System

**CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8**

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 15<sup>th</sup> day of March, 2006.

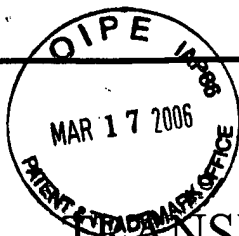
  
Diane Racicot

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Submitted herewith are:

1. Transmittal Form (1 pg.);
2. Fee Transmittal Form (1 pg.);
3. A check in the amount of \$450.00;
4. Amendment and Response (8 pgs.);
5. Petition of Extension of Time (1 pg.); and
6. Return receipt postcard.

LIBC/2707574.1



# TRANSMITTAL FORM

Application Serial Number	10/720,845
Filing Date	November 24, 2003
First Named Inventor	Jones
Group Art Unit	3728
Examiner Name	Anthony D. Stashick
Attorney Docket No.	ADI-099
Confirmation No.	3619
Patent No.	Not applicable
Issue Date	Not applicable

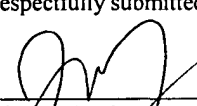
## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences
<input checked="" type="checkbox"/> Amendment and Response <input type="checkbox"/> Preliminary <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]	<input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Appeal Brief (in triplicate)
<input checked="" type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal	<input type="checkbox"/> Status Inquiry
<input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations	<input type="checkbox"/> Associate Power of Attorney	<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8
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	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/> Additional Enclosure(s) (please identify below)
	<input type="checkbox"/> CD(s) for large table or computer program	
	<input type="checkbox"/> Amendment After Allowance	
	<input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	

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